UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

TUN 26 2008 aewJUN 26 2008 aewJUN 26 2008
MICHAEL W. DOBBINS
CLERK, U.S. DISTRICT COURT

Charles Head	
(Enter above the full name	
of the plaintiff or plaintiffs in	
this action)	08CV3663
Clo Harrington	JUDGE GOTTSCHALL MAGISTRATE JUDGE NOLAN
Cook County Deputy Sher	
Cermak Health Care ser	VICE
Cook county Jail	
l	
(Enter above the full name of ALL	
defendants in this action. <u>Do not</u> use "et al.")	
CHECK ONE ONLY:	
COMPLAINT UNDER THE U.S. Code (state, county, or	HE CIVIL RIGHTS ACT, TITLE 42 SECTION 1983 municipal defendants)
COMPLAINT UNDER TH 28 SECTION 1331 U.S. Co	IE CONSTITUTION ("BIVENS" ACTION), TITLE
OTHER (cite statute, if kno	·
REFORE FILLING OUT THE COURT	ATT TO THE TOTAL PROPERTY OF THE PARTY OF TH

BEFORE FILLING OUT THIS COMPLAINT, PLEASE REFER TO "INSTRUCTIONS FOR FILING." FOLLOW THESE INSTRUCTIONS CAREFULLY.

I.	Plai	ntiff(s):	
	Α.	Name: Charles Head	
	В.	List all aliases: Steve Head, MArvin Williams	
	C.	Prisoner identification number: 2007008471	
	D.	Place of present confinement: COOK County Jaj	
	E,	Address: 2600 5, CAlifornia AVe. 60608	
	num	here is more than one plaintiff, then each plaintiff must list his or her name, aliases, I.D. ber, place of confinement, and current address according to the above format on a rate sheet of paper.)	
Π.	Defendant(s): (In A below, place the full name of the first defendant in the first blank, his or her of position in the second blank, and his or her place of employment in the third blank. So for two additional defendants is provided in B and C.)		
	Α.	Defendant: C/o Harrington 7 to 3 Shift Title: Icansportation officer Cook County Deputy Sherif	
		Place of Employment: COOK County Jail	
	В.	Defendant: Clrmax Heath care Service	
		Title: Hospital of Cook County bil	
	•	Place of Employment:	
	C.	Defendant:	
		Title:	
		Place of Employment:	

(If you have more than three defendants, then all additional defendants must be listed according to the above format on a separate sheet of paper.)

List ALL lawsuits you (and your co-plaintiffs, if any) have filed in any state or federal III. court in the United States:

А	
	approximate date of filing lawsuit: 1999
L:	ist all plaintiffs (if you had co-plaintiffs), including any aliases:
Li	ist all defendants: Clo BiHen Binder
Co	ourt in which the lawsuit was filed (if federal court, name the district; if state courted the county):
	arne of judge to whom case was assigned: N/A
Ba	sic claim made: ASSUAJ+
Dis La :	sposition of this case (for example: Was the case dismissed? Was it appealed to the court of court appealed to the court of court

IF YOU HAVE FILED MORE THAN ONE LAWSUIT, THEN YOU MUST DESCRIBE THE ADDITIONAL LAWSUITS ON ANOTHER PIECE OF PAPER, USING THIS SAME FORMAT. REGARDLESS OF HOW MANY CASES YOU HAVE PREVIOUSLY FILED, YOU WILL NOT BE EXCUSED FROM FILLING OUT THIS SECTION COMPLETELY, AND FAILURE TO DO SO MAY RESULT IN DISMISSAL OF YOUR CASE. CO-PLAINTIFFS MUST ALSO LIST ALL CASES THEY HAVE FILED.

IV. Statement of Claim:

State here as briefly as possible the facts of your case. Describe how each defendant is involved, including names, dates, and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. (Use as much space as you need. Attach extra sheets if necessary.)

urnina -Lasec to my right remotes with Clo Rabus over Teturning the officers were removing the Shackles hand cuffs and the Harrington was playing with Tumate Tony Palmer 20080004155, yo Harrington Stated do was turn this Key and 50,000 Volts Knock you down 40 Harrington pointed -/n Palmer time itelt Major pain traveling up my right Because of his Carelessness C/o Harrington Could Caused My procentaker to Stop working and Me into Cardiac arrest and Inmale Alexader Rit. U.Cl

Revised 9/2007

Thimate Tony Palmer R.T. y.CZ 4
Clo Davis
Clo Rabus All 7 to 3
Clo Nauverro
Clo Allen transportation officers
Clo wright

After the incident i asked clocobbs if i could
See a doctor because i was not feeling well
at this time Co Cobbs went to the back to Ask
a nurse if i could be seen. He resturned and
told me I could not be seen because it was a
non-emergency. If being tasered and complaing
of Chest pains was not an emergency im not sur
what is.

V. Relief:

State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.

Luculd like to have the Co brought up on Charges and i plan to Sue him along with Cermak health care services for dening me medical Attention

VI. The plaintiff demands that the case be tried by a jury. YES \(\sigma\) NO

CERTIFICATION

By signing this Complaint, I certify that the facts stated in this Complaint are true to the best of my knowledge, information and belief. I understand that if this certification is not correct, I may be subject to sanctions by the Court.

Signed this 3 day of MAY, 2008

(Signature of plaintiff or plaintiffs)

Charles Head

(Print name)

2007008471

(I.D. Number)

Cook County Jail

2600 S. Cali fornia AVE

Chicago II. 60608

(Address)